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TERRE HAUTE, IND.

Why Physicians Should Be Socialists

BY

Father Thomas J. Hagerty, A. M., S. T. B.
Author of "Economic Discontent and Its Remedy," Etc.

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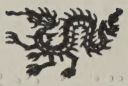

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October 3, 1907

OFFERING

To Dr. A. G. Kreidler, of Cincinnati, whose uncommon skill and faithfulness as a physician, whose intellectual honesty as a scientist, and whose large-heartedness as a man have given enlightenment, solace, and encouragement to me in trying hours, this pamphlet is lovingly dedicated by his friend, the author.

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Why Physicians Should be Socialists.

By Father Thomas J. Hagerty.

Dr. Alfred Russell Wallace, in his remarkable book, *The Wonderful Century,* summing up the scientific achievements and failures of the nineteenth century, devotes more than a hundred pages to an attempt to prove that vaccination is a delusion. The arguments derive their force chiefly from statistics. His method is right in so far as it goes: but the overwhelmingness of statistics is not final unless the causes back of them are absolute. Without the inclusion of profit-seeking as a determining factor, the logic of the table of figures is nerveless and halting and can, at best, only

> "Skin and film the ulcerous place;
> Whiles rank corruption, mining all within,
> Infects unseen."

In the matter of vaccination, statistics are worthless when it can be shown that, for some reason or other, the operative procedure in the given cases failed of scientific accuracy.

Now, the average fee for vaccinating is fifty cents. When small-pox appears in a town, scores of persons hurry to the physician's office for prophylactic treatment. His ante-room is crowded with men, women, and children. The majority of them he has never seen in a professional way prior to their visit. He cannot afford the time to make an individual examination of each man, woman, and child at the fee of fifty cents per capita. A man comes into the office and is told to roll up

his sleeve. It is more than likely in many instances that the man has not had a bath in a fortnight. Renal and hepatic elimination may be, on this particular day, at their lowest point of efficiency. The colon and the entire intestinal tract may be loaded down with the septic by-products of a week. Perhaps gonorrhæa or syphilis is present, or some form of exanthema. The exudates from that great branch of the sewer-system of the body, the skin, are caught up with the virus over the area of its introduction and sent back into the general circulation. The man is physiologically unprepared for vaccination and, in all probability, septicæmia will result. To keep up an unbroken chain of asepsis in the rush of men, women, and children, at fifty cents per capita would be almost profitless and impracticable.

As a matter of necessity, the person to be vaccinated ought to visit the doctor's office for four or five days before the operation. As thorough an examination should be made of him as that required for insurance in the most exacting companies. He should be brought as near as possible to the norm of physical well-being; and the vaccination should be done under perfectly aseptic conditions. But since a physician's living expenses are far in excess of the layman's estimate thereof, he could not well do all this for less than $8.00 or $10.00 the case. Manifestly, however, the great mass of the working people cannot pay so high a fee: and the consequence is that they must run their chances of swollen arms, deformities, blood-poisoning, and death.

No right-minded physician, true to the spirit of the ancient Æsculapian oath, would willingly make any distinction between rich and poor, if he could help himself: but such distressingly concrete things as bread and meat, clothes, fuel,

lights, office-rent, books, instruments, and the cost of keeping abreast of the day in his profession must be obtained in the fierce competition of the times; and the doctor must, perforce, give the larger service where the bigger fee is to be had.

One of the most striking consequences of this necessity is that in his fight with the White Plague among the poor he is always worsted. In the words of Dr. Powell, "phthisis is essentially a scourge of what we call civilization. All the depressing conditions of life—anxiety, mental strain, disappointments, bad sanitation, over-crowding, debauchery,—are concentrated at the centers of civilization. The weakly are helped to live; rickets, scrofula, syphilis, catarrhs prevail; the general tone of health is depressed; recovery from acute specific diseases—measles, whooping-cough, and from inflammatory chest diseases—is less complete; germs, putrefactive and other, are so rife, that special precautions against them are necessary to secure the healing of wounds. All that we know about phthisis would lead us to expect its prevalence under such conditions." (*Diseases of the Lungs and Pleura,* p. 193. New York, 1886.) Many tenement-houses are literally alive with tuberculosis; and, as Flick has shown, family after family inhabiting them fall victims to the dread tubercle bacilli.

Poverty compels the toilers to huddle together in close, ill-ventilated rooms where the air, reeking with a thousand ills, is not enough for a babe in arms. Dr. William F. Waugh reports some startling effects of such crowding: "The most remarkable cases of galloping consumption I have ever known were in four men who occupied a very small bed-room. One became tuberculous and spit all over the floor, walls, and bed. Two of the others were attacked, and died, one in six weeks, the other in four days. The lungs were crowded with tubercles to an in-

credible extent." (*Diseases of the Respiratory Organs,* Part II., ch. xiii, p. 62. Chicago, 1901.) Dr. S. A. Knopf, of New York, a recognized specialist on phthisis, affirms that "Tuberculosis is and must always be considered not only in a purely medical, but also in a social aspect. . . . . It is the badly-housed, underfed, overworked people, weakened by disease, intemperance and excesses, who soonest fall a prey to the tuberculosis bacillus. We as physicians must insist that the dark, dreary, badly-ventilated tenement home and lodging house should disappear. . . . . What is saddest of all is that the underfeeding of the poorer classes extends to the children, especially during their school age, when the organism is growing rapidly and the desire for good and abundant food is most pronounced. . . . . The poor alone have no one to turn to for advice; they only go to the dispensary when they are really sick; they neither have time nor are they observant enough to discover slight ailments such as an impaired digestion or lack of assimilation, conditions which are the true forerunners of consumption. . . . . In the family of the poor the disease must be far enough advanced for a layman to discover it before medical aid can be expected." (*Journal American Medical Association,* June 15, 1901, pp. 1679, 1680, 1681.)

Prof. Robert Koch, in his address delivered before a general meeting of the British Congress on Tuberculosis, London, July 23, 1901, states that "every medical man who has often entered the dwellings of the poor, and I can speak on this point from my own experience, knows the sad lot of consumptives and their families there. The whole family have to live in one or two small, ill-ventilated rooms. The patient is left without the nursing he needs, because the able-bodied members

of the family must go to their work. How can the necessary cleanliness be secured under such circumstances? How is such a helpless patient to remove his sputum, so that it may do no harm? But let us go a step farther and picture the condition of the poor consumptive's dwelling at night. The whole family sleep crowded together in one small room. However cautious he may be, the sufferer scatters the morbid matter secreted by his diseased lungs every time he coughs, and his relatives close beside him must inhale the poison. Thus whole families are infected." As essentials of treatment Dr. Waugh postulates that "consumptives should use a portable cuspidor. The sputa should be burnt; chemical disinfectants are less certain. Thee feces and urine should be passed into a vessel containing freshly made whitewash, and allowed to stand an hour before emptying. When the patient vacates his apartments, by death or otherwise, the disinfection should be as thorough as possible, the most satisfactory method being to burn the house down. No person should occupy the same bed as the consumptive, and the children of such parents should be taken to another residence if possible. They should be systematically hardened, by cold baths, salt rubbing and open-air life, carefully regulated exercise, scientific feeding and, in a word, all the resources of modern hygiene." (Op. cit., p. 63.)

How many among the wage-earners have the leisure, the knowledge and the means to carry out all these requirements? The shop girl with a paltry three or four dollars a week cannot afford to go to a climate in which she can spend the most time in the open air. "An equable climate, without sudden changes of extreme heat or cold, with a maximum of sunny days, with a dry atmosphere and a free circulation of air" (ibid., p. 65.) is as much beyond her reach as the North Pole.

As long as strength remains to her, she must go on working or barter her sickly body for bread in poor-house or brothel. Even, if through some dole of charity, she does succeed in getting to Arizona, New Mexico, or Colorado, how is she to find employment in places where almost every boarding-house has the ominous sign, "No Consumptives Taken"?

What can the physician do in such cases but resign himself to the inevitable? He is impotent against the industrial conditions which make for ignorance and disease. The bodies upon which he must exercise his skill have already been weakened almost beyond repair by the evil influences of their surroundings. The youngest lives are tainted with disease almost of necessity. "Vitiated air from overcrowding, absence of sunlight, exposure to cold and damp, are important factors in producing acquired scrofula. It is difficult or impossible to estimate the effects of one or the other by itself, as they so constantly are associated together, being the conditions usually accompanying squalor and poverty." (Keating's *Cyclopedia of the Diseases of Children,* vol. ii., p. 140. Phila. 1889.)

Of what avail is all the physician's cleverness against the pitifully insufficient nourishment, the over-worked bodies, the toil-blunted brains, the cheap, half-poisoned food, and the almost necessarily unhygienic habits of the workers in sweat shops and factories? What can he do to save the child-slaves in the glass-works and cotton-mills when their weakened tissues are in the clutch of scarlet-fever, meningitis, or diphtheria? When the pregnant woman, in order to eke out the family wage, is toiling long hours over the wash-tub, breathing the foul moisture of steaming clothes and wasting the strength which should go to the development of the foetus, of what use is it for the physician to order her to stop working

when the stopping would mean almost starvation for her and her children? Is it not a vain waste of words to insist upon more wholesome food for the prospective mother when there is not the wherewithal to buy it? Can a vigorous offspring be hoped for under such conditions? We know that "defective nutrition in the mother, with its consequent anæmia, either is fatal to the fœtus in utero, or else is accountable for the birth of puny, wretched children, who die early or drag through a sickly childhood. . . . . Not only improper or insufficient nourishment, but also other unfavorable conditions of life, as cold, dampness, lack of light and ventilation, may play a part in the production of fœtal rachitis." (Keating's *Cyclopedia,* vol. i., pp. 219, 230.) While it is true that much of the enormous infant mortality in the first six months of life is due to the natural organic growth which is likely to produce pathologic changes, it is nevertheless certain that social conditions play a leading part in swelling the infant death-rate. "The foul air of narrow, crowded rooms, the more or less improper food, the influence of cold, hunger, the lack of maternal care—all these influences combine to impede the normal course of development, and to produce the harrowing pictures of disease with which we come in contact. Many of these unfortunate beings carry with them the seeds of death, and die of exhaustion within the first few days after birth; others succumb to hereditary syphilis; the majority become puny in consequence of persistent diarrhœa, or repeated attacks of bronchitis with enlargement of the bronchial glands, which finally lead to cheesy degeneration and general tuberculosis." (Dr. Edward Henoch, *Lectures on the Diseases of Children,* Introd. p. 2. New York, 1882.)

In studying the etiology of disease, the physician is always

brought into contact with environmental causes as well as with those of heredity. In the last analysis, heredity is reduced also to environment: for it is simply foregoing environment projected into present environment. He has to deal with alcoholism, for instance, and he learns that among the poor the predisposing influences to this disease are brutally in evidence. Defective neural function and equilibrium, due to meagre nourishment cause a desire for something at once stimulant and sedative. "With appetite ground to keenest edge by a hunger that is never fed, the children of the poor grow up in joyless homes to lives of wearisome toil that claims them at an age when the play of their happier fellows has just begun." (Jacob A. Riis, *How the Other Half Lives,* ch. xv., p. 182. New York, 1897.) These children never, or rarely, acquire a large reserve fund of strength, and when manhood is reached their toil-exhausted tissues clamor for stimulation, and they resort to alcohol. Moreover, "from their earliest childhood drunkenness, blasphemy, dishonesty, prostitution, indecency of every form, are their most familiar experiences. All social influences, such as they are, are influences of vice. As they grow up life seems to them to present little more than the alternative of hard, ill-paid, and at the same time precarious labor, probably ending in the poor-house, or crime with its larger and swifter gains, and its intervals of coarse pleasure probably, though not certainly, followed by the prison or an early death." (Lecky, *The Map of Life,* ch. vi., p. 69. New York, 1899.)

Out of such economic environment grow the criminals who, had their surroundings and inheritance been right, would be useful members of society instead of outlaws. "When we consider the early surroundings (unhygienic conditions, alco-

holic parents, etc.) of the criminal, where he may begin vice as soon as consciousness awakes, malformations, due to neglect and rough treatment, are not surprising. Yet cranial malformations may be frequently due to osteological conditions. But here, still, hereditary influence and surrounding conditions in early life exert their power. Many are scrofulous and rachitic which affections modify the osteological structure. In its turn the cranium forces the brain to a reduction in its development, and in general nutritional perturbations cause irremediable troubles in the brain." (MacDonald, *Criminology,* Part I., ch. ii., p. 56. New York, 1893.) The well-known Italian criminologist, Prof. Enrico Ferri, gives it as the sum of his studies that "it is to the social factors that we must chiefly attribute the periodic variations of criminality. For even the variations which can be detected in certain anthropological factors, like the influences of age and sex upon crime, and the more or less marked outbreak of anti-social and pathological tendencies, depend in their turn upon social factors, such as the protection accorded to abandoned infants, the participation of women in non-domestic, commercial and industrial life, preventive and repressive measures, and the like. and again, since the social factors have special import in occasional crime, and crime by acquired habit, and since these are the most numerous sections of crime as a whole, it is clear that the periodic movement of crime must be attributed in the main to the social factors." (*Criminal Sociology,* ch. ii., p. 62. New York, 1897.)

In spite of all the science in the world, so long as economic inequalities exist these evils will continue; and the physician's work will be palliative rather than curative and constructive. While the many are kept in the bond-

age of wage-slavery and the few confiscate the bulk of their production the toilers will be prisoners in a disease-and-crime-breeding environment. So long as men are permitted to make merchandise out of the brain and muscle of their fellow-men the avenues of life will be blocked with the wreckage of humanity and the most sacred things sacrificed to the Demon of Profit. So long as the stolen products of labor are used to swaddle the infants of the rich in thousand-dollar gowns, the cradle-song of the poor will be a hopeless dirge:

> "Hush! I cannot bear to see thee
> Stretch thy tiny hands in vain:
> Dear, I have no bread to give thee,
> Nothing, child, to ease thy pain!
> When God sent thee first to bless me,
> Proud and thankful too was I;
> Now, my darling, I, thy mother
> Almost long to see thee die."

Is there not some terrible injustice in the distribution of wealth which dooms the working-class to poverty; which binds them, Prometheus-like, to the tread-mill of hopeless labor

> "In darkness, and amid the many shapes
> Of daylight,"

Which robs them—the actual producers—of the wealth which they create and which leaves them unable freely to secure the advantages and skill of science when their lives are in danger? Is there not something radically wrong in our social system when the physician's best efforts are nullified by the wretchedly unhealthy environment of the slums into which so many workers are driven by starvation wages?

In the face of these tragic things the physician is helpless. Nay, more: even in his practise among the middle class and

the better paid workingmen he is hampered by the mad profit-seeking which competition begets in his profession. If he has a dozen calls to make between office hours, he is in a hurry to get through with them in order to get back to the patients who may be waiting for him in the office. If he neglects his office patients, some other doctor will get them, and he will lose the fees. He goes into a house, therefore, makes a diagnosis, writes a prescription, gives directions, and hastens on to the next case. It may be that the first case is one which requires his presence and watchfulness for hours instead of minutes; but he cannot afford to stay. For want of his cool judgment at a critical moment a life may be lost which such powerful alkaloids as glonoin, pushed to physiologic effect by a master hand, might have saved.

From the profit point of view the profession of medicine is overcrowded, while from the point of view of the actual needs of the common people there are not half enough physicians intelligently and fully to take care of the sick. The coal-miner out of the princely sum of 80 cents a day cannot feed, clothe, and educate his family and have much left to pay doctor's fees. In fact, one might well repeat the question of Dr. George W. Galvin, surgeon-in-chief, Boston Emergency Hospital, can any workingman "with or without a family, when employment is uncertain, and with sickness and death liable to visit his household, pay professional fees? Can a person earning less than forty or fifty dollars a week afford to pay a thoroughly competent physician or surgeon? Remember that the poor and unfortunate require as skilled professional treatment as those of wealth and in more independent circumstances. I know of no young medical man in practise for less than five years who could afford to employ the best medical

talent and meet his obligations, even if he were fairly successful in his profession. How many patients receive a regular salary of twenty dollars a week? And how many who apply at hospitals are there who average twelve or fifteen dollars weekly in salary? The merchants, contractors, and railroad officials are well qualified to answer that question". (*The Doctor, The Hospital and The Patient,* p. 4. Boston, 1898.) The limited hours reserved for patients and the inadequate number of physicians and surgeons comprising the staffs of those hospitals where free treatment is given the poor work a hardship upon the toiler who musters up courage enough to face the dishonor of charity. Here again the testimony of Dr. Galvin is irrefutable. The length of the quotation is amply justified by the significance of the facts. "We find the patients have arrived promptly—say 9 o'clock. Every settee is crowded with young and old; mothers nursing their babies; wives who have arranged to return to their household duties by 11 or 11:30 in order to prepare the family dinner; shop girls and clerks who can be spared but an hour or two from their duties; children with diseases of all kinds, some contagious, crowded into small rooms, fretful, crying, and dragging at the tired mothers to be taken home. The deputies and subordinates are ready for their work, but where is the doctor? Ten o'clock, eleven and twelve,—three hours of useless waiting,—and no physician to minister to suffering humanity. I have known one o'clock to pass before the arrival of the medical man, and by that time three-fourths of the patients have returned to their homes or places of employment without relief and with a sense of neglect. But the sign is still there: Be Here at Nine O'clock. Is it right, is it common humanity, when scores of young physicians and surgeons, as well quali-

fied as those connected with hospitals, are waiting and hoping against hope for recognition and appointment? This neglect of professional duty is of daily occurrence; and if you think I am exaggerating, ask a trustworthy friend to go to the hospitals and investigate. The day is Saturday. In the surgical department are patients suffering from fractured collar-bones, arms, fingers, ankles, toes, all of which are painful injuries. Everybody knows that a broken bone is followed by swelling, sometimes by inflammation, which causes agonizing pain, necessitating the immediate removal of the splints and bandages on account of their tightness. Sprains, infected wounds, burns and scalds, cuts and bruises, form a class of surgical cases. The wound a few hours after dressing has become dry, hot, swollen, and painful. But all these cases must wait until Monday, forty-eight hours intervening before the patient secures relief. Why? Limitation of hospital hours and inadequate surgical and medical staffs." (ibid., pp. 7, 8.) Indeed, a disposition has developed in the past ten years to make the public subservient to the profession and to maintain the physician in a position of unapproachable authority regardless of the rights of the people. Capitalism, with its consequent impoverishment of the masses, has set up false standards of ethics in medicine as in everything else. It has so cheapened the value of human life that it is nothing compared to a new fact in science. The following instances from the *Medical Brief* of June, 1899, are evidence to the point: "At the Konigsberg Hospital of Midwifery, Professor ———, experimenting with Koch's new tuberculin, made injections of fifty times the maximum dose prescribed by Koch, in forty new-born children. Inoculations

of various virulent bacterial cultures were also made on a large number of women at the same institution.

"A German physician tells, without any apparent understanding of the heinousness of the offence, how he inoculated a young woman with a poisonous virus.

"Dr. ———, assistant physician in the University Hospital for Women at Leipsic, made similar inoculations on a helpless woman. The same man inoculated a new-born infant with a culture of staphylococci, in the Royal University Ear Hospital.

"A Dr. ——— inoculated two boys with the virus from a boil, and both died from a pustular disease.

"Dr. ———, Professor of Children's Diseases at Prague, infected five children with round worms just for the sake of experiment. These are a few instances of every-day practises in the hospitals and clinics on the Continent."

It is not any wonder that these doctors hold human life in such cheap esteem: for it is the spirit of the times to feed the fires of commerce with the bodies and souls of men. Every sun sets upon a life prematurely wiped out in the present social system. It is not a whit worse to force the workers into the disease-laden, death-dealing hovels of the Fourth Estate than to inoculate boys with pyogenic bacteria. Indeed, the latter is the less wicked of the two. It has a semblance of higher purpose, compared to the tragic waste of life wherewith the Capitalism of to-day stands crimsoned in the blood of toil.

Granting, however, the strictest conscience to the doctor, his work is hindered under the present social system by the dishonesty which profit-seeking begets in the men who furnish him with the medicines by means of which he is to fight disease. For the sake of the gain of a mill on the cent, the whole-

sale chemist will not scruple to adulterate the most vital drugs. In fact, it has been calculated that, if the men who have been engaged during the past fifteen years in working out cheap substitutes for the food and drugs of the market had devoted their splendid talents to the legitimate field of science, chemistry would be fifty years ahead of where it is to-day. As Dr. Lawrence asks, in *The Medical Brief,* "How many physicians know that paregoric is often made with benzoic acid obtained from urine, and two samples can seldom be found which resemble each other in physical properties or therapeutic strength? Three-fourths of the salicylic acid sold is obtained from coal-tar and not from true oil of wintergreen, and often produces serious gastro-enteric inflammation. Cheap preparations of ipecac are inert. Much of the podophyllin in the market is precipitated with alum, and unfit for use. Many fluid preparations must be made from green roots or leaves to be therapeutically active; yet drugs being simply merchandise to the man who makes his living buying and selling them, he will not take these nice distinctions into consideration. Sweet spirits of niter, spirits of mindererus, syrup iodide of iron, oil of erigeron, tincture of nux vomica, tincture of belladonna, tincture of digitalis, ammonium carbonate, etc., are all injured by age, yet they continue to be dispensed until the supply gives out. No doubt many a poor man has gone to that 'bourne from which no traveler e'er returns' for want of a little digitalis which was something more than colored water." (Quoted in *American Alkalometry,* vol. ii., p. 582.) To make a phosphorized proteid—capable of enhancing and multiplying the leucocytes in the blood—out of a powerful germicide and disinfectant is an impossibility; yet a certain firm of chemists are selling a weak solution of formaldehyde in lieu

of that Nuclein solution which was first brought to the attention of American practitioners by Dr. John Aulde of Philadelphia.

The same profit-mongering which militates against the effectual practise of medicine operates against the safety of human life in a thousand different ways. A so-called Medical Society advertises in all the leading magazines to cure morphine and cocaine habits. An analysis of their remedy reveals it to be nothing more than opium and whiskey with a few extracts like that of aurantii dulcis corticis to disguise the taste. The daily papers of all our great cities teem with advertisements of the "Lost Manhood Restored" quacks who ruin our young men and help fill the insane asylums with victims of their evil craft. The abortionist, with his unspeakable iniquities, is another efflorescence of our present social system.

The main-spring of all these evils is profit; and their only solution lies in Socialism, which would eliminate profit and its viperous brood of wrongs. Socialism is the ownership of all the means of subsistence by an intelligently cohesive organization of the whole people and the common proprietorship of the machinery of production and distribution to the end that the arts and sciences and the agencies of happiness may be developed in the equal interests of humanity. It calls for a new social structure builded upon labor as the only source of wealth. Socialism would give to every one the full product of his toil: so that no man could exploit his fellow-man. Nothing, therefore, could be gained by adulterating food and drugs; nothing could be acquired by trafficking in the weaknesses of human flesh; nothing could be obtained by meretricious playing upon the ignorance or shame of the youth of our land: because no profit would be had from such things.

The physician could devote more time to individual patients, for the simple reason that his share of the social product would be amply sufficient to supply all his needs and he would not, therefore, have to worry about worldly affairs. There would be no commercial over-crowding of the profession because the duties of medical men would be performed in shifts of two or three hours; thus giving places to all and allowing all more leisure for study and research. The calling out of the doctor at all times of the day and night and the consequent drain upon his vitality from irregular hours would be stopped; because there would be a division of labor in his profession just as in the industrial occupations. Merit, not money, would be the test of one's abilities; and no man, with a talent for medicine or surgery, would be shut out of the colleges and laboratories on account of poverty, for there could be no poverty under Socialism.

With the highly-developed machinery of our time in the hands of the people and all the sources of subsistence publicly owned for the common good of the race and not for the private gain of the individual, the wealth of the country could be doubled and trebled at an expenditure of less than three hours of labor a day. Disease-sodden tenements and foul slums would give place to healthy settlements, rejoicing in the most sanitary improvements, which the quickened art and science of the nation would build and adorn for the people. The long hours of exhausting toil, the poverty, semi-starvation, ignorance, and unhygienic housing having been excluded, succeeding generations of men and women would be physiologically and, hence, mentally and morally better and stronger. Zymotic diseases would end with the total disappearance of the filth upon which they fattened; and the terri-

ble plague of phthisis would eventually be wiped out. The physician's work would, then, be constructive and lasting; and the children of men would rise up and call him blessed.

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